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PTO/SB/05 (05-03)

Approved for use through 10/31/2002. OMB 0651-0032

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UTILITY PATENT APPLICATION TRANSMITTAL	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">Attorney Docket No.</td> <td>7383H-000004/US</td> </tr> <tr> <td>First Inventor</td> <td>Pekosz, et al.</td> </tr> <tr> <td>Title</td> <td>METHODS AND COMPOSITIONS FOR DETECTION OF SEGMENTED NEGATIVE STRAND RNA VIRUSES</td> </tr> <tr> <td>Express Mail Label No.</td> <td>EV 298496729 US</td> </tr> </table>	Attorney Docket No.	7383H-000004/US	First Inventor	Pekosz, et al.	Title	METHODS AND COMPOSITIONS FOR DETECTION OF SEGMENTED NEGATIVE STRAND RNA VIRUSES	Express Mail Label No.	EV 298496729 US
Attorney Docket No.	7383H-000004/US								
First Inventor	Pekosz, et al.								
Title	METHODS AND COMPOSITIONS FOR DETECTION OF SEGMENTED NEGATIVE STRAND RNA VIRUSES								
Express Mail Label No.	EV 298496729 US								

(Only for new nonprovisional applications under 37 C.F.R. 1.53(b))

<p style="text-align: center;">APPLICATION ELEMENTS</p> <p style="font-size: small;">See MPEP chapter 600 concerning utility patent application contents.</p> <p>1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <i>(Submit an original and a duplicate for fee processing)</i></p> <p>2. <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> <p>3. <input checked="" type="checkbox"/> Specification [Total Pages 51] <i>(preferred arrangement set forth below)</i></p> <ul style="list-style-type: none"> - Descriptive title of the Invention - Cross References to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure <p style="text-align: right; font-size: small;"><input checked="" type="checkbox"/> Specification filed in English</p> <p>4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 5]</p> <p>5. Oath or Declaration [Total Pages]</p> <p style="padding-left: 20px;">a. <input checked="" type="checkbox"/> Newly executed (original or copy)</p> <p style="padding-left: 20px;">b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63 (d)) <i>(for a continuation/divisional with Box 18 completed)</i></p> <p style="padding-left: 20px;">i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</p> <p>6. <input checked="" type="checkbox"/> Application Data Sheet. See 37 CFR 1.76</p>	<p style="text-align: center;">ADDRESS TO:</p> <p style="font-size: small;">Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450</p> <p>7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (<i>Appendix</i>)</p> <p>8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)</p> <p style="padding-left: 20px;">a. <input type="checkbox"/> Computer Readable Form (CRF)</p> <p style="padding-left: 20px;">b. Specification Sequence Listing on:</p> <p style="padding-left: 40px;">i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or</p> <p style="padding-left: 40px;">ii. <input type="checkbox"/> paper</p> <p style="padding-left: 20px;">c. <input type="checkbox"/> Statements verifying identity of above copies</p> <p style="text-align: center;">ACCOMPANYING APPLICATIONS PARTS</p> <p>9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))</p> <p>10. <input type="checkbox"/> 37 C.F.R. §3.73(b) Statement <input checked="" type="checkbox"/> Power of Attorney <i>(when there is an assignee)</i></p> <p>11. <input type="checkbox"/> English Translation Document (if applicable)</p> <p>12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations</p> <p>13. <input type="checkbox"/> Preliminary Amendment</p> <p>14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i></p> <p>15. <input type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i></p> <p>16. <input type="checkbox"/> Request and Non Publication under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.</p> <p>17. <input checked="" type="checkbox"/> Other: <u>Check in the amount of \$1,266</u></p>
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18. If a **CONTINUING APPLICATION**, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP)

of prior application No: _____ / _____

Prior application information: Examiner _____

Group / Art Unit: _____

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

17. CORRESPONDENCE ADDRESS					
<input checked="" type="checkbox"/> Customer Number or Bar Code Label		28997		or <input type="checkbox"/> Correspondence address below	
(Insert Customer No. or Attach bar code label here)					
Name	Saul L. Zackson				
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Name (Print/Type)	Saul L. Zackson	Registration No. (Attorney/Agent)	52,391
Signature		Date	November 3, 2003

EV 298496729 US

17510 US PTO 10/7/00290



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15866 U.S. PTO

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FEE TRANSMITTAL for FY 2004		Complete if Known	
		Application Number	Unknown
Patent fees are subject to annual revision.		Filing Date	November 3, 2003
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		First Named Inventor	Pekosz, et al.
TOTAL AMOUNT OF PAYMENT (\$)		Examiner Name	Unknown
		Art Unit	Unknown
1,266		Attorney Docket No.	7383H-000004/US

METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)	
<input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money <input type="checkbox"/> Other <input type="checkbox"/> None Order		3. ADDITIONAL FEES	
<input type="checkbox"/> Deposit Account: Deposit Account Number: 08-0750 Deposit Account Name: Harness, Dickey & Pierce, P.L.C.		Large Entity Small Entity	
The Director is authorized to: (check all that apply) <input type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments <input checked="" type="checkbox"/> Charge any additional fee(s) during the pendency of this application <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.		Fee Code Fee (\$)	
FEE CALCULATION		Fee Description Fee Paid	
1. BASIC FILING FEE		1051 130 2051 65 Surcharge - late filing fee or oath	
Large Entity Small Entity		1052 50 2052 25 Surcharge - late provisional filing fee or cover sheet.	
Fee Code Fee (\$)		1053 130 1053 130 Non-English specification	
1001 770 2001 385 Utility filing fee		1812 2,520 1812 2,520 For filing a request for reexamination	
1002 340 2002 170 Design filing fee		1804 920* 1804 920* Requesting publication of SIR prior to Examiner action	
1003 530 2003 265 Plant filing fee		1805 1,840* 1805 1,840* Requesting publication of SIR after Examiner action	
1004 770 2004 385 Reissue filing fee		1251 110 2251 55 Extension for reply within first month	
1005 160 2005 80 Provisional filing fee		1252 420 2252 210 Extension for reply within second month	
SUBTOTAL (1) (\$ 385.00)		1253 950 2253 475 Extension for reply within third month	
2. EXTRA CLAIM FEES		1254 1,480 2254 740 Extension for reply within fourth month	
Total Claims 94 -20 ** = 74 X 9 = 666		1255 2,010 2255 1,005 Extension for reply within fifth month	
Independent Claims 8 -3 ** = 5 X 43 = 215		1401 330 2401 165 Notice of Appeal	
Multiple Dependent X		1402 330 2402 165 Filing a brief in support of an appeal	
Large Entity Small Entity		1403 290 2403 145 Request for oral hearing	
Fee Code Fee (\$)		1451 1,510 1451 1,510 Petition to institute a public use proceeding	
1202 18 2202 9 Claims in excess of 20		1452 110 2452 55 Petition to revive - unavoidable	
1201 86 2201 43 Independent claims in excess of 3		1453 1,330 2453 665 Petition to revive - unintentional	
1203 290 2203 145 Multiple dependent claim, if not paid		1501 1,330 2501 665 Utility issue fee (or reissue)	
1204 86 2204 43 ** Reissue independent claims over original patent		1502 480 2502 240 Design issue fee	
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent		1503 640 2503 320 Plant issue fee	
SUBTOTAL (2) (\$ 881)		1460 130 1460 130 Petitions to the Commissioner	
**or number previously paid, if greater; For Reissues, see above		1807 50 1807 50 Processing fee under 37 CFR 1.17 (q)	
		1806 180 1806 180 Submission of Information Disclosure Stmt	
		8021 40 8021 40 Recording each patent assignment per property (times number of properties)	
		1809 770 2809 385 Filing a submission after final rejection (37 CFR § 1.129(a))	
		1810 770 2810 385 For each additional invention to be examined (37 CFR § 1.129(b))	
		1801 770 2801 385 Request for Continued Examination (RCE)	
		1802 900 1802 900 Request for expedited examination of a design application	
		Other fee (specify) _____	
		*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$)	

SUBMITTED BY		Complete (if applicable)	
Name (Print/Type)	Saul L. Zackson	Registration No. Attorney/Agent	52,391
Signature		Telephone	314-726-7500
		Date	November 3, 2003

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EV 298496/29 US